

County: Oneida
HORIZONS UNLIMITED
P.O. BOX 857

Facility ID: 4670

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RHINELANDER 54501 Phone:(715) 365-6900
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 102
Total Licensed Bed Capacity (12/31/02): 102
Number of Residents on 12/31/02: 96

Ownership:
Highest Level License: FDDs
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? No
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 106

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		
Home Health Care	No					1 - 4 Years		1.0
Supp. Home Care-Personal Care	No					More Than 4 Years		1.0
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	78.1			97.9
Day Services	Yes	Mental Illness (Org./Psy)	0.0	65 - 74	16.7			-----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	5.2			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	0.0	65 & Over	21.9	-----		
Transportation	No	Cerebrovascular	0.0		-----	RNs		8.0
Referral Service	Yes	Diabetes	0.0	Sex	%	LPNs		3.1
Other Services	No	Respiratory	0.0	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	50.0	Aides, & Orderlies		
Mentally Ill	No		-----	Female	50.0			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care		
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)
Int. Skilled Care	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Skilled Care	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Intermediate	---	---	---		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Limited Care	---	---	---		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Personal Care	---	---	---		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Residential Care	---	---	---		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Dev. Disabled	---	---	---		96	100.0	220	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	96
Traumatic Brain Inj	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Ventilator-Dependent	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Total	0	0.0				96	100.0		0	0.0		0	0.0		0	0.0		0	0.0	96

100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				

Percent Admissions from:		Activities of		%	% Needing Assistance of	Total
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One Or Two Staff	% Totally Dependent	Number of Residents
Private Home/With Home Health	0.0	Bathing	1.0	46.9	52.1	96
Other Nursing Homes	0.0	Dressing	13.5	41.7	44.8	96
Acute Care Hospitals	100.0	Transferring	40.6	35.4	24.0	96
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	22.9	34.4	42.7	96
Rehabilitation Hospitals	0.0	Eating	19.8	47.9	32.3	96
Other Locations	0.0	*****				
Total Number of Admissions	2	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	1.0		Receiving Respiratory Care	1.0
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	79.2		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	5.0	Occ/Freq. Incontinent of Bowel	66.7		Receiving Suctioning	0.0
Other Nursing Homes	5.0				Receiving Ostomy Care	16.7
Acute Care Hospitals	0.0	Mobility			Receiving Tube Feeding	15.6
Psych. Hosp.-MR/DD Facilities	20.0	Physically Restrained	31.3		Receiving Mechanically Altered Diets	70.8
Rehabilitation Hospitals	0.0				Other Resident Characteristics	
Other Locations	45.0	Skin Care			Have Advance Directives	2.1
Deaths	25.0	With Pressure Sores	0.0		Medications	
Total Number of Discharges		With Rashes	4.2		Receiving Psychoactive Drugs	33.3
(Including Deaths)	20					

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility %	FDD Facilities %	Ratio	All Facilities %	Ratio

Occupancy Rate: Average Daily Census/Licensed Beds	95.8	83.9	1.14	85.1	1.13
Current Residents from In-County	8.3	38.2	0.22	76.6	0.11
Admissions from In-County, Still Residing	50.0	18.5	2.70	20.3	2.46
Admissions/Average Daily Census	1.9	20.3	0.09	133.4	0.01
Discharges/Average Daily Census	18.9	23.6	0.80	135.3	0.14
Discharges To Private Residence/Average Daily Census	0.9	9.8	0.10	56.6	0.02
Residents Receiving Skilled Care	0.0	0.0	0.00	86.3	0.00
Residents Aged 65 and Older	21.9	15.3	1.43	87.7	0.25
Title 19 (Medicaid) Funded Residents	100.0	99.2	1.01	67.5	1.48
Private Pay Funded Residents	0.0	0.6	0.00	21.0	0.00
Developmentally Disabled Residents	100.0	99.5	1.00	7.1	14.08
Mentally Ill Residents	0.0	0.4	0.00	33.3	0.00
General Medical Service Residents	0.0	0.1	0.00	20.5	0.00
Impaired ADL (Mean)*	60.0	54.0	1.11	49.3	1.22
Psychological Problems	33.3	48.2	0.69	54.0	0.62
Nursing Care Required (Mean)*	13.5	11.3	1.19	7.2	1.88